

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

NORTHSTAR LEADERSHIP PAC

ADDRESS (number and street)

PO Box 28754

Check if different
than previously
reported. (ACC)

St. Paul

MN

55128

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00386573

3. IS THIS
REPORTNEW
(N)**OR**AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report(Q1)July 15
Quarterly Report(Q2)October 15
Quarterly Report(Q3)January 31
Quarterly Report(YE)July 31 Mid-Year
Report(Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2008

through

03

31

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Jeff Larson

Signature of Treasurer

Electronically Filed by Jeff Larson

Date

06

16

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**

(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
NORTHSTAR LEADERSHIP PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		37539.39
(b) Cash on Hand at Beginning of Reporting Period	37539.39	
(c) Total Receipts (from Line 19)	59495.39	59495.39
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	97034.78	97034.78
7. Total Disbursements (from Line 31)	84388.92	84388.92
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	12645.86	12645.86
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	49604.99	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

NORTHSTAR LEADERSHIP PAC

Report Covering the Period:

From:

M M
0 1D D
0 1Y Y Y Y
2 0 0 8

To:

M M
0 3D D
3 1Y Y Y Y
2 0 0 8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	25000.00	25000.00
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	25000.00	25000.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	0.00	0.00
(b) Political Party Committees	34000.00	34000.00
(c) Other Political Committees (such as PACs)	59000.00	59000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➡		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	337.75	337.75
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	157.64	157.64
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	59495.39	59495.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	59495.39	59495.39

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	41888.92	41888.92
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	41888.92	41888.92
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	42500.00	42500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	84388.92	84388.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	84388.92	84388.92

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	59000.00	59000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	59000.00	59000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	41888.92	41888.92
37. Offsets to Operating Expenditures (from Line 15, page 3)	337.75	337.75
38. Net Operating Expenditures (subtract Line 37 from Line 36)	41551.17	41551.17

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

NORTHSTAR LEADERSHIP PAC

A.

Full Name (Last, First, Middle Initial)

Ward W Brehm

Mailing Address 706 2nd Ave So

City

Minneapolis

State

MN

Zip Code

55402

FEC ID number of contributing
federal political committee.

C

Name of Employer
The Brehm Group Inc

Occupation
Chairman

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.4166

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

John H and Mary Lou Dasburg

Mailing Address 2699 South Bayshore Dr

City

Miami

State

FL

Zip Code

33133

FEC ID number of contributing
federal political committee.

C

Name of Employer
Airstar Cargo

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.4119

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

John Grundhofer

Mailing Address 800 Nicollet Mall

City

Minneapolis

State

MN

Zip Code

55402

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.4121

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTHSTAR LEADERSHIP PAC

A.

Full Name (Last, First, Middle Initial)

Patricia L Meier

Mailing Address 408 North First Street
Unit 102

City State Zip Code
Minneapolis MN 55401

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.4129

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Robert J Ulrich

Mailing Address 5400 Londonberry Road

City State Zip Code
Edina MN 55436

FEC ID number of contributing
federal political committee.

C

Name of Employer
Target

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.4127

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

25000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 32

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC

A.

Full Name (Last, First, Middle Initial)
3M COMPANY

Mailing Address **PAC 3M Center Building 224-6S-03**

City State Zip Code
St. Paul MN 55144

FEC ID number of contributing
federal political committee.

C **C00084475**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

01 / 15 / 2008

Transaction ID: SA11C.4145

Amount of Each Receipt this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

ABBOTT LABORATORIES EMPLOYEE POLITICAL ACTION COMMITTEE

Mailing Address **100 Abbott Park Rd.
D312 AP6D-2**

City State Zip Code
Abbott Park IL 60064

FEC ID number of contributing
federal political committee.

C **C00040279**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

03 / 28 / 2008

Transaction ID: SA11C.4164

Amount of Each Receipt this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

ACPAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address **4040 W. 70th St**

City State Zip Code
Minneapolis MN 55435

FEC ID number of contributing
federal political committee.

C **C00034785**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

03 / 31 / 2008

Transaction ID: SA11C.4167

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

9500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTHSTAR LEADERSHIP PAC

A.

Full Name (Last, First, Middle Initial)

AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE

Mailing Address Palladian 1
220 Leigh Farm Rd

City State Zip Code
Durham NC 27707

FEC ID number of contributing
federal political committee.

C C00077321

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 3 / 2 0 0 8

Transaction ID: SA11C.4152

Amount of Each Receipt this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

ELECTRICAL CONSTRUCTION PAC-NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION, INC (ECPAC)

Mailing Address 3 BETHESDA METRO CENTER SUITE 1100

City State Zip Code
BETHESDA MD 20814

FEC ID number of contributing
federal political committee.

C C00113811

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 2 8 / 2 0 0 8

Transaction ID: SA11C.4165

Amount of Each Receipt this Period

1500.00

C.

Full Name (Last, First, Middle Initial)

LOCKRIDGE GRINDAL NAUEN POLITICAL FUND

Mailing Address 100 WASHINGTON AVE SO SUITE 2200

City State Zip Code
MINNEAPOLIS MN 55401

FEC ID number of contributing
federal political committee.

C C00167916

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 2 / 2 6 / 2 0 0 8

Transaction ID: SA11C.4141

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

4500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 32

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTHSTAR LEADERSHIP PAC

A.

Full Name (Last, First, Middle Initial)
MWH AMERICAS INC. EMPLOYEE PAC

Mailing Address 380 Interlocken Crescent
Suite 200

City State Zip Code
Broomfield CO 80021

FEC ID number of contributing
federal political committee. **C** C00242370

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 7 / 2 0 0 8

Transaction ID: SA11C.4151

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)

Mailing Address 1771 N Street NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing
federal political committee. **C** C00009985

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 2 6 / 2 0 0 8

Transaction ID: SA11C.4163

Amount of Each Receipt this Period

5000.00

See memo at end of FEC re-
port

C.

Full Name (Last, First, Middle Initial)
RAD POLITICAL ACTION COMMITTEE

Mailing Address 1155 21st Street NW
Suite 300

City State Zip Code
Washington DC 20036

FEC ID number of contributing
federal political committee. **C** C00331090

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 1 / 2 0 0 8

Transaction ID: SA11C.4146

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 32

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NORTHSTAR LEADERSHIP PAC

A.

Full Name (Last, First, Middle Initial)
RAD POLITICAL ACTION COMMITTEE

Mailing Address 1155 21st Street NW
Suite 300

City State Zip Code
Washington DC 20036

FEC ID number of contributing
federal political committee.

C C00331090

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 4 / 2 0 0 8

Transaction ID: SA11C.4148

Amount of Each Receipt this Period

4000.00

B.

Full Name (Last, First, Middle Initial)
TARGETCITIZENS POLITICAL FORUM

Mailing Address 1000 Nicollet Mall
TPS 3275

City State Zip Code
Minneapolis MN 55403

FEC ID number of contributing
federal political committee.

C C00098061

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 3 / 0 5 / 2 0 0 8

Transaction ID: SA11C.4150

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

9000.00

TOTAL This Period (last page this line number only)

34000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bellwether Consulting</p> <p>Mailing Address 1775 I St NW Ste 700</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement PAC Dinner Expenses on 12/12/2007</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4202</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3179.25"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bellwether Consulting</p> <p>Mailing Address 1775 I St NW Ste 700</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Consulting - PAC Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4205</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bellwether Consulting</p> <p>Mailing Address 1775 I St NW Ste 700</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Consulting - PAC Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4212</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p>

SUBTOTAL of Disbursements This Page (optional)

5179.25

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bellwether Consulting</p> <p>Mailing Address 1775 I St NW Ste 700</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Consulting - PAC Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4203</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3250.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bellwether Consulting</p> <p>Mailing Address 1775 I St NW Ste 700</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Consulting - PAC Fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4218</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Elan Services - VISA</p> <p>Mailing Address PL Box 790408</p> <p>City St Louis State MO Zip Code 63179</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.4225</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="392.83"/></p>

SUBTOTAL of Disbursements This Page (optional)

4642.83

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC

A. Full Name (Last, First, Middle Initial) Elizabeth Maruggi	Transaction ID: SB21B.4209 Date of Disbursement																				
Mailing Address 660 Howell Street S	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	9		2	0	0	8												
City St Paul State MN Zip Code 55116	Amount of Each Disbursement this Period																				
Purpose of Disbursement Consulting - PAC Administrative Fee Candidate Name	<table border="1"> <tr> <td colspan="10">625.00</td> </tr> </table>	625.00																			
625.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Elizabeth Maruggi	Transaction ID: SB21B.4281 Date of Disbursement																				
Mailing Address 660 Howell Street S	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	9		2	0	0	8												
City St Paul State MN Zip Code 55116	Amount of Each Disbursement this Period																				
Purpose of Disbursement Consulting - PAC Administrative Fee Candidate Name	<table border="1"> <tr> <td colspan="10">625.00</td> </tr> </table>	625.00																			
625.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Elizabeth Maruggi	Transaction ID: SB21B.4213 Date of Disbursement																				
Mailing Address 660 Howell Street S	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	5		2	0	0	8												
City St Paul State MN Zip Code 55116	Amount of Each Disbursement this Period																				
Purpose of Disbursement Consulting - PAC Administrative Fee Candidate Name	<table border="1"> <tr> <td colspan="10">625.00</td> </tr> </table>	625.00																			
625.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

1875.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC

A.

Full Name (Last, First, Middle Initial)

Elizabeth Maruggi

Mailing Address 660 Howell Street S

City
St Paul

State
MN

Zip Code
55116

Purpose of Disbursement
Consulting - PAC Administrative Fee

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4215

Date of Disbursement

02 / 15 / 2008

Amount of Each Disbursement this Period

625.00

B.

Full Name (Last, First, Middle Initial)

FLS Connect, LLC

Mailing Address 7300 Hudson Blvd
Suite 270

City
St Paul

State
MN

Zip Code
55128

Purpose of Disbursement
Reimb. Meals for PAC Meeting

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4267

Date of Disbursement

01 / 29 / 2008

Amount of Each Disbursement this Period

1349.37

C.

Full Name (Last, First, Middle Initial)

FLS Connect, LLC

Mailing Address 7300 Hudson Blvd
Suite 270

City
St Paul

State
MN

Zip Code
55128

Purpose of Disbursement
Consulting-PAC mgmt salaries, rent

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4276

Date of Disbursement

01 / 29 / 2008

Amount of Each Disbursement this Period

3500.00

SUBTOTAL of Disbursements This Page (optional)

5474.37

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NORTHSTAR LEADERSHIP PAC

A.

Full Name (Last, First, Middle Initial)

FLS Connect, LLC

Mailing Address 7300 Hudson Blvd
Suite 270

City State Zip Code
St Paul MN 55128

Purpose of Disbursement
Consulting-PAC mgmt salaries, rent

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4277

Date of Disbursement

01 / 29 / 2008

Amount of Each Disbursement this Period

3500.00

B.

Full Name (Last, First, Middle Initial)

Patton Boggs LLP

Mailing Address 2550 M Street NW

City State Zip Code
Washington DC 20037

Purpose of Disbursement
Legal Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4289

Date of Disbursement

02 / 15 / 2008

Amount of Each Disbursement this Period

276.75

C.

Full Name (Last, First, Middle Initial)

Patton Boggs LLP

Mailing Address 2550 M Street NW

City State Zip Code
Washington DC 20037

Purpose of Disbursement
Legal Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4290

Date of Disbursement

02 / 15 / 2008

Amount of Each Disbursement this Period

5.15

SUBTOTAL of Disbursements This Page (optional)

3781.90

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC

A. Full Name (Last, First, Middle Initial) Patton Boggs LLP	Transaction ID: SB21B.4291 Date of Disbursement																				
Mailing Address 2550 M Street NW	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	5		2	0	0	8												
City Washington State DC Zip Code 20037	Amount of Each Disbursement this Period																				
Purpose of Disbursement Legal Fees Candidate Name	<table border="1"> <tr> <td colspan="10">222.50</td> </tr> </table>	222.50																			
222.50																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Richard Nelson	Transaction ID: SB21B.4208 Date of Disbursement																				
Mailing Address 1975 Portland Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	9		2	0	0	8												
City St Paul State MN Zip Code 55104	Amount of Each Disbursement this Period																				
Purpose of Disbursement Consulting - PAC Fundraising Candidate Name	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Richard Nelson	Transaction ID: SB21B.4210 Date of Disbursement																				
Mailing Address 1975 Portland Ave	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	9		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	9		2	0	0	8												
City St Paul State MN Zip Code 55104	Amount of Each Disbursement this Period																				
Purpose of Disbursement Consulting - PAC Fundraising Candidate Name	<table border="1"> <tr> <td colspan="10">5000.00</td> </tr> </table>	5000.00																			
5000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

10222.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC

A. Full Name (Last, First, Middle Initial) Richard Nelson	Transaction ID: SB21B.4211 Date of Disbursement
Mailing Address 1975 Portland Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 8</div> </div>
City St Paul State MN Zip Code 55104	Amount of Each Disbursement this Period
Purpose of Disbursement Consulting - PAC Fundraising Candidate Name	<div> <div>5000.00</div> <div>003</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Richard Nelson	Transaction ID: SB21B.4216 Date of Disbursement
Mailing Address 1975 Portland Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 4 / 2 0 0 8</div> </div>
City St Paul State MN Zip Code 55104	Amount of Each Disbursement this Period
Purpose of Disbursement Consulting - PAC Fundraising Candidate Name	<div> <div>5000.00</div> <div>003</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Sarah Hazen	Transaction ID: SB21B.4220 Date of Disbursement
Mailing Address 1484 Canfield	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 9 / 2 0 0 8</div> </div>
City St Paul State MN Zip Code 55108	Amount of Each Disbursement this Period
Purpose of Disbursement Consulting - Accounting Candidate Name	<div> <div>240.00</div> <div>001</div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

10240.00

TOTAL This Period (last page this line number only)

41415.85

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC

A. Full Name (Last, First, Middle Initial)
ELIZABETH DOLE COMMITTEE INC

Mailing Address PO BOX 2918

City RALEIGH State NC Zip Code 27602

Purpose of Disbursement

Candidate Name
ELIZABETH DOLE COMMITTEE INC

Office Sought: ☐ House
☒ Senate
☐ President

State: NC District: 00

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: SB23.4199

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)
Friends of Erik Paulsen

Mailing Address PO BOX 44369

City EDEN PRAIRIE State MN Zip Code 55344

Purpose of Disbursement

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ President

State: MN District: 03

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: SB23.4200

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2500.00

C. Full Name (Last, First, Middle Initial)
JIM GILMORE FOR SENATE

Mailing Address 631 S WASHINGTON STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☒ Senate
☐ President

State: VA District: 00

Disbursement For: 2008
☐ Primary ☒ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: SB23.4187

Date of Disbursement

/ /

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC

A.

Full Name (Last, First, Middle Initial)
JOHANNNS FOR SENATE INC

Mailing Address 1201 O STREET SUITE 101

City State Zip Code
LINCOLN NE 68506

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General
☐ Other (specify) ▼
State: NE District: 00

Transaction ID: SB23.4192

Date of Disbursement

M M / D D / Y Y Y Y
03 / 10 / 2008

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
JOHN KENNEDY FOR US SENATE INC

Mailing Address PO BOX 14861

City State Zip Code
BATON ROUGE LA 70898

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General
☐ Other (specify) ▼
State: LA District: 00

Transaction ID: SB23.4188

Date of Disbursement

M M / D D / Y Y Y Y
03 / 07 / 2008

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
LINDSEY GRAHAM FOR SENATE

Mailing Address PO BOX 1801

City State Zip Code
COLUMBIA SC 29202

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General
☐ Other (specify) ▼
State: SC District: 00

Transaction ID: SB23.4201

Date of Disbursement

M M / D D / Y Y Y Y
03 / 26 / 2008

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC

A. Full Name (Last, First, Middle Initial)
PAT ROBERTS FOR SENATE

Mailing Address PO BOX 433

City State Zip Code
GREAT BEND KS 67530

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General
☐ Other (specify) ▼
State: KS District: 00

Transaction ID: SB23.4193

Date of Disbursement

M M / D D / Y Y Y Y
03 26 2008

Amount of Each Disbursement this Period

5000.00

B. Full Name (Last, First, Middle Initial)
TEAM SUNUNU

Mailing Address PO BOX 500

City State Zip Code
RYE NH 03870

Purpose of Disbursement

Candidate Name
TEAM SUNUNU

Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General
☐ Other (specify) ▼
State: NH District: 00

Transaction ID: SB23.4265

Date of Disbursement

M M / D D / Y Y Y Y
03 31 2008

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
TEXANS FOR SENATOR JOHN CORNYN

Mailing Address 6850 AUSTIN CENTRE BLVD
SUITE 180

City State Zip Code
AUSTIN TX 78731

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House ☒ Senate ☐ President
Disbursement For: 2008 ☐ Primary ☒ General
☐ Other (specify) ▼
State: TX District: 00

Transaction ID: SB23.4198

Date of Disbursement

M M / D D / Y Y Y Y
03 03 2008

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

15000.00

TOTAL This Period (last page this line number only)

42500.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Bellwether ConsultingNature of Debt (Purpose):
Email Blast and Shipping
chargesMailing Address 1775 I St NW
Ste 700City State ZIP Code
Washington DC 20006

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.4251

Amount Incurred This Period

56.14

Payment This Period

0.00

Outstanding Balance at Close of This Period

56.14

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Elizabeth MaruggiNature of Debt (Purpose):
Consulting - PAC Administ-
rative Fee

Mailing Address 660 Howell Street S

City State ZIP Code
St Paul MN 55116

Outstanding Balance Beginning This Period

625.00

Transaction ID: SD10.4280

Amount Incurred This Period

0.00

Payment This Period

625.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS Connect, LLCNature of Debt (Purpose):
Consulting-PAC mgmt salar-
ies, rentMailing Address 7300 Hudson Blvd
Suite 270City State ZIP Code
St Paul MN 55128

Outstanding Balance Beginning This Period

3500.00

Transaction ID: SD10.4275

Amount Incurred This Period

0.00

Payment This Period

3500.00

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional).....

56.14

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS Connect, LLCNature of Debt (Purpose):
Consulting - PAC Fundrais-
ing FeesMailing Address 7300 Hudson Blvd
Suite 270City State ZIP Code
St Paul MN 55128

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD10.4261

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS Connect, LLCNature of Debt (Purpose):
Consulting-PAC mgmt salar-
ies, rentMailing Address 7300 Hudson Blvd
Suite 270City State ZIP Code
St Paul MN 55128

Outstanding Balance Beginning This Period

3500.00

Transaction ID: SD10.4274

Amount Incurred This Period

0.00

Payment This Period

3500.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS Connect, LLCNature of Debt (Purpose):
Consulting - PAC Fundrais-
ing FeesMailing Address 7300 Hudson Blvd
Suite 270City State ZIP Code
St Paul MN 55128

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD10.4259

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) **SUBTOTALS** This Period This Page (optional).....

5000.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS Connect, LLCNature of Debt (Purpose):
Consulting-PAC mgmt salaries, rentMailing Address 7300 Hudson Blvd
Suite 270City State ZIP Code
St Paul MN 55128

Outstanding Balance Beginning This Period

3500.00

Transaction ID: SD10.4260

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS Connect, LLCNature of Debt (Purpose):
Consulting-PAC mgmt salaries, rentMailing Address 7300 Hudson Blvd
Suite 270City State ZIP Code
St Paul MN 55128

Outstanding Balance Beginning This Period

3500.00

Transaction ID: SD10.4244

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS Connect, LLCNature of Debt (Purpose):
Consulting - PAC Fundraising FeesMailing Address 7300 Hudson Blvd
Suite 270City State ZIP Code
St Paul MN 55128

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD10.4250

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) SUBTOTALS This Period This Page (optional).....

9500.00

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS Connect, LLCNature of Debt (Purpose):
Consulting-PAC mgmt salaries, rentMailing Address 7300 Hudson Blvd
Suite 270City State ZIP Code
St Paul MN 55128

Outstanding Balance Beginning This Period

3500.00

Transaction ID: SD10.4243

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS Connect, LLCNature of Debt (Purpose):
Consulting - PAC Fundraising FeesMailing Address 7300 Hudson Blvd
Suite 270City State ZIP Code
St Paul MN 55128

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD10.4249

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS Connect, LLCNature of Debt (Purpose):
Consulting-PAC mgmt salaries, rentMailing Address 7300 Hudson Blvd
Suite 270City State ZIP Code
St Paul MN 55128

Outstanding Balance Beginning This Period

3500.00

Transaction ID: SD10.4242

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3500.00

1) SUBTOTALS This Period This Page (optional).....

9500.00

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

NORTHSTAR LEADERSHIP PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS Connect, LLCNature of Debt (Purpose):
Consulting - PAC Fundrais-
ing FeesMailing Address 7300 Hudson Blvd
Suite 270City State ZIP Code
St Paul MN 55128

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD10.4248

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS Connect, LLCNature of Debt (Purpose):
Consulting-PAC mgmt salar-
ies, rentMailing Address 7300 Hudson Blvd
Suite 270City State ZIP Code
St Paul MN 55128

Outstanding Balance Beginning This Period

3500.00

Transaction ID: SD10.4241

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS Connect, LLCNature of Debt (Purpose):
Consulting - PAC Fundrais-
ing FeesMailing Address 7300 Hudson Blvd
Suite 270City State ZIP Code
St Paul MN 55128

Outstanding Balance Beginning This Period

2500.00

Transaction ID: SD10.4247

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) SUBTOTALS This Period This Page (optional).....

8500.00

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS Connect, LLCNature of Debt (Purpose):
Consulting - PAC IT SupportMailing Address 7300 Hudson Blvd
Suite 270City State ZIP Code
St Paul MN 55128

Outstanding Balance Beginning This Period

1349.37

Transaction ID: SD10.4266

Amount Incurred This Period

0.00

Payment This Period

1349.37

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS Connect, LLCNature of Debt (Purpose):
Consulting-PAC mgmt salaries, rentMailing Address 7300 Hudson Blvd
Suite 270City State ZIP Code
St Paul MN 55128

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.4238

Amount Incurred This Period

3500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS Connect, LLCNature of Debt (Purpose):
Consulting - PAC Fundraising FeesMailing Address 7300 Hudson Blvd
Suite 270City State ZIP Code
St Paul MN 55128

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.4246

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) SUBTOTALS This Period This Page (optional).....

6000.00

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS Connect, LLCNature of Debt (Purpose):
Reimburse for Lodging on
11/20/2007Mailing Address 7300 Hudson Blvd
Suite 270City State ZIP Code
St Paul MN 55128

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.4262

Amount Incurred This Period

473.83

Payment This Period

0.00

Outstanding Balance at Close of This Period

473.83

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS Connect, LLCNature of Debt (Purpose):
Consulting-PAC mgmt salaries, rentMailing Address 7300 Hudson Blvd
Suite 270City State ZIP Code
St Paul MN 55128

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.4237

Amount Incurred This Period

3500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3500.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FLS Connect, LLCNature of Debt (Purpose):
Consulting - PAC Fundrais-
ing FeesMailing Address 7300 Hudson Blvd
Suite 270City State ZIP Code
St Paul MN 55128

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.4245

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) SUBTOTALS This Period This Page (optional).....

6473.83

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 29 / 32

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Links PrintNature of Debt (Purpose):
Christmas gifts for Senate
members

Mailing Address 1065 E Highway 36

City State ZIP Code
Maplewood MN 55109

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.4252

Amount Incurred This Period

2280.18

Payment This Period

0.00

Outstanding Balance at Close of This Period

2280.18

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Patton Boggs LLPNature of Debt (Purpose):
Legal Fees

Mailing Address 2550 M Street NW

City State ZIP Code
Washington DC 20037

Outstanding Balance Beginning This Period

1690.00

Transaction ID: SD10.4258

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1690.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Patton Boggs LLPNature of Debt (Purpose):
Legal Fees

Mailing Address 2550 M Street NW

City State ZIP Code
Washington DC 20037

Outstanding Balance Beginning This Period

4.74

Transaction ID: SD10.4284

Amount Incurred This Period

0.00

Payment This Period

4.74

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

3970.18

2) **TOTALS** This Period (last page this line number only).....3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 30 / 32

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Patton Boggs LLPNature of Debt (Purpose):
Legal Fees

Mailing Address 2550 M Street NW

City State ZIP Code
Washington DC 20037

Outstanding Balance Beginning This Period

276.75

Transaction ID: SD10.4285

Amount Incurred This Period

0.00

Payment This Period

276.75

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Patton Boggs LLPNature of Debt (Purpose):
Legal Fees

Mailing Address 2550 M Street NW

City State ZIP Code
Washington DC 20037

Outstanding Balance Beginning This Period

5.15

Transaction ID: SD10.4286

Amount Incurred This Period

0.00

Payment This Period

5.15

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Patton Boggs LLPNature of Debt (Purpose):
Legal Fees

Mailing Address 2550 M Street NW

City State ZIP Code
Washington DC 20037

Outstanding Balance Beginning This Period

222.50

Transaction ID: SD10.4287

Amount Incurred This Period

0.00

Payment This Period

222.50

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional).....

0.00

2) TOTALS This Period (last page this line number only).....**3) TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
NORTHSTAR LEADERSHIP PAC**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Unisource DirectNature of Debt (Purpose):
Design and printing-PAC
Fundraising MailMailing Address 7 N Pinckney St
Ste 225DCity State ZIP Code
Madison WI 53703

Outstanding Balance Beginning This Period

604.84

Transaction ID: SD10.4254

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

604.84

1) **SUBTOTALS** This Period This Page (optional)..... ▶

604.84

2) **TOTALS** This Period (last page this line number only)..... ▶

49604.99

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

49604.99

Image# 28931889855

Form/Schedule: **SA11C**

Transaction ID: **SA11C.4163**

The National Association of Broadcasters PAC (NAB) received a \$5,000 contribution from Mr. Louis Buron. The NAB indicated on their check to the Northstar Leadership PAC that Mr. Louis Buron had earmarked this check for the Northstar Leadership PAC. The Northstar LPAC did not receive a contribution 'earmarked' for a Federal candidate.
